

## HAWAII STATE ETHICS COMMISSION

1001 BISHOP STREET, ASB TOWER 970 P.O. BOX 616, HONOLULU, HAWAII 96809 TEL: 587-0460 FAX: 587-0470 email: ethics@hawaiiethics.org

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## LOBBYIST REGISTRATION FORM

(Type or Print Clearly)

PART I LOBBYIST	(.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
NAME (Last)	(First)	(Middle)	TELEPHONE	
Ueoka	Leslie	Alan	546-2898	
MAILING ADDRESS (Street)	FAX			
1177 Bishop Street			546-8500	
(City)	(State)	(Zip Code)		
Honolulu	Hawaii	96813		
EMPLOYING ORGANIZATION (Fill in only if you are employed by a business entity which has been retained to lobby)			TELEPHONE	
Hawaiian Telcom, Inc.			546-2898	
MAILING ADDRESS (Street)			FAX	
1177 Bishop Street			546-8500	
(City)	(State)		(Zip Code)	
Honolulu	Hawaii		96813	

PART II ORGANIZATION			
NAME OF ORGANIZATION YOU	TELEPHONE 546-2898		
Hawaiian Telcom Service			
MAILING ADDRESS (Street)	FAX		
1177 Bishop Street	546-8500		
(City)	(State)	(Zip Code)	
Honolulu	Hawaii	96813	
NAME OF PERSON RESPONSIBLE FOR PREPARING ORGANIZATION'S EXPENDITURES STATEMENT		TELEPHONE	
JoAnn Yosemori	546-3868		
MAILING ADDRESS (Street)	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	FAX	
1177 Bishop Street		546-8500	
(City)	(State)	(Zip Code)	
Honolulu	Hawaii	96813	

PART III DESCRIPTION OF SUBJECTS UPON WHICH YOU EXPECT TO LOBBY						
☐ Agricultu	ıre	Education	☐ Human Services	Science, Technology & Economic Development		
Commul Public U	nications & tilities	Government Operation & Finance	<ul><li>Intergovernmental Relations, International Affairs</li></ul>	☐ Tourism & Recreation		
Consum Comme	er Protection &	Hawaiian Affairs	Labor & Employment	Transportation		
Culture, Preserva	Arts, Historic ation	☐ Health	Planning, Land & Water Use Management	Other: (indicate below)		
Ecology Environi	, Energy mental Protection	☐ Housing	Public Safety & Corrections			
PART IV	CERTIFICATION	OF LOBBYIST				
I hereby certify that the information furnished above is, to the best of my knowledge, correct and complete.						
'	-1/1/1/1N	h1		/ n +T		
/ www				1-3-07		
	(	(Signature of Lobbyist)		(Date)		
	AUTHODITATIO	N TO LODDY				
NAME	PART V AUTHORIZATION TO LOBBY  NAME TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED					
	0 D I					
Michael	S. Ruley		Chief Executive Officer			
NAME OF C	ORGANIZATION (if app	olicable)		TELEPHONE		
Hawaiia	n Telcom, Inc.			546-3868		
MAILING A	DDRESS (Street)			FAX		
1177 Bis	shop Street			546-8500		
(City	′)	(State)	(	Zip Code)		
Honolulu	I	Hawaii 96813				
I hereby authorize the above - named person to engage in lobbying activities on behalf of the undersigned.						
			/ =			
	- 11/	all & July		1-03-07		
	(Signature of Auth	norizing Officer or Person Repr	resented)	(Date)		